U.S. Peters and Tradement Office; U.S. DEPARTMENT OF COMMERCE the Paperson Reduction Act of 1995, no persons are required to respond to a collection of information unless a displays a valid CMB control number.

| PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 Effective December 8, 2004 | | | | | | | | | | Acologyan cological warfard | | |
|--|---|--|---|--|------------------|---|--------------------|----------------------------|-----------|-----------------------------|----------------------------|--|
| APPLICATION AS FILED - PART I (Column 1) (Column 2) | | | | | | | | ENTITY . | . OR | OTHER THAN SMALL ENTITY | | |
| | FÖR | NUM | NUMBER FILED | | NUMBER EXTRA | | RATE (\$) | FEE (1) | | RATE (1) | FEE (1) | |
| | IC FEE CFR 1 18(a) (b) Ø | (4)) | NA : | | MIA | | AVA | 150.00 | | N/A . | 300.00 | |
| SEARCH FEE DI CFR 1 18(U. (4.0° (m)) | | | N/A | | NIA | | in v | \$250 | : | · N/A | \$500 | |
| EXAMINATION FEE | | | · N/A | | AVA . | | NA | \$100 | | : N/A | \$200 | |
| TO | TAL CLARKS | | minus 20 = | | • | | X\$ 25 . | | ok | X\$50 . | | |
| DVD | OFR 1:16(4) EPENDENT CLA | IM\$ ··· | mnus 3 * | | • | | X100 . | 1 | 1. | X200 . | | |
| APF | CER 1 16(N) PLICATION SIZE CER 1 16(1) | sheets of is \$250 (| If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). | | | | | | · | | | |
| MUNTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1 16(1)) | | | | | | | . +160= | | | +360= | | |
| * If the difference in column 1 is less than zero, enter "O" in column 2. | | | | | | 5 | TOTAL | | ٠, : | TOTAL . | | |
| 4 | APPLICATION AS AMENDED - PART II / (Column 1) (Column 2) (Column 3): // CLAIMS REMAINING REMAINING AFTER PREVIOUSLY EXTRA | | | | | | SMALL RATE (6) | ENTITY ADDI- | OR | OTHER SMALL RATE (5) | ADDI- | |
| AMENDMENT | Total | AMENDMENT | | PAID FOR | - // | 1 | Ve oc | FEE (S) | | X\$50 | FEE (1) | |
| | Total creceden | 36 | Minus | -10 | - 19 | | X\$.25 . | · | OR . | x200 | | |
| | Endependent - COF R 110NU | 10 | (6(a)) | 10 | | | × | | OR | | | |
| ₹ | Application Size Fee (37 CFR 1.16(s)) PIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(s)) | | | | | | +180= | | OR | +360= | . · . | |
| | | | | | | | TOTAL ADD'L FEE | • | OR: | TOTAL ADO'L FEE | · | |
| • | | (Column 1) | | (Column 2) | (Column 3) | | | | | · · | | |
| 118 | 5/20/04 | CLAIMS REMAINING AFTER. AMENDMENT | F | HIGHEST NUMBER REVIOUSLY PAID FOR | PRESENT EXTRA | | RATE (1) | ADDI- TIONAL FEE (S) | | RATE (5) | ADOI- TIONAL FEE (5) | |
| ¥ | Total care : | .35 | Minus * | 36 | •. / | | X\$ 25 . | | OR. | X\$50 • | • | |
| AMENDMENT | Endependent (SF CFR 1.18p.)) | . 9 | Minus . | 10 | •/ | | X100 . | | OR - | X200. | | |
| \$ | Application Size Fee (37CFR 1.16(s)) | | | | | | · | | / | .000 | | |
| | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(1)) | | | | | | +180= | | OR | +360= | | |
| | • | | | | | | ADD'L FEE | | OR | ADO'L FEE | | |

If the entry in column 1 is less than the entry in column 2, write "O' in column 3.

If the "Rightest Number Previously Paid For" (IN THIS SPACE is less than 20, enter "20".

If the Trightest Number Previously Paid For" (IN THIS SPACE is less than 3, enter "2".

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

Is collection of Internation is required by 37 CFR 1.16. The information is required to obtain or retain a baneful by the public which is to file (and by the 2000 process) as confireful.

The public which is to file (and by the 2000 process) as confireful. as collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the PTO to process) an application. Confidentially is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, buding gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent I Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ORRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.